

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY****ORDER TO SHOW CAUSE WHY
APPEAL SHOULD NOT BE DISMISSED****CASE NO.**

Court address

Court telephone no.

Plaintiff name(s) and address(es)

☐ Appellant**v**

Defendant name(s) and address(es)

☐ Appellant

Plaintiff's attorney, bar no., address, and telephone no.

Defendant's attorney, bar no., address, and telephone no.

1. Appellant has filed an appeal with this court.
2. Appellant has failed to comply with the following provisions of the Michigan Court Rules concerning appeals:

IT IS ORDERED:

3. The appellant's attorney shall appear on _____ at _____ to show cause why
Date Time
the appeal should not be dismissed.

Date_____
Circuit Court Judge_____
Bar no.**CERTIFICATE OF MAILING**

I certify that copies of this notice were served upon the parties by ordinary mail addressed to their last known addresses.

Date_____
Court Clerk